

## Cancer Genetic Counseling Assessment Tool

COMPONENTS	Elements / Definition	Level 1	Level 2	Level 3	Level 4	Level 5
<b>Patient Identification</b>	<p>Potential patient numbers based on 20% of <i>applicable</i> yearly analytic cases having hereditary and/or familial predisposition for:</p> <ul style="list-style-type: none"> <li>• Breast, Breast/Ovary</li> <li>• Colon, Colon/Uterine</li> <li>• Other                             <ul style="list-style-type: none"> <li>○ <i>Genodermatoses</i></li> <li>○ <i>Thyroid</i></li> <li>○ <i>Renal/neuroendocrine</i> <ul style="list-style-type: none"> <li>▪ <i>Pediatric</i></li> </ul> </li> </ul> </li> </ul>	0-20% of appropriate patients identified	21-40% of appropriate patients identified	41-60% of appropriate patients identified	61-80% of appropriate patients identified	81-100% of appropriate patients identified
<b>Physician Referrals</b>	<p>Subtypes of clinicians:</p> <ul style="list-style-type: none"> <li>• Tier one- top referring physician subtype (ex. Medical oncology)—always to often refer</li> <li>• Tier two-refers occasionally to often</li> <li>• Tier three-rare to few referrals</li> </ul>	Majority (>90%) of referrals from one Tier one	85% Tier one 15% tier two	75% tier one 20% tier two 5% tier three	70% tier one 25% tier two 5% tier three	60% tier one 30% tier two 10% tier three
<b>Services provided</b>	<p>Cancer Genetics Service lines:</p> <ul style="list-style-type: none"> <li>• Breast, Breast/Ovary</li> <li>• Colon, Colon/Uterine</li> <li>• Other                             <ul style="list-style-type: none"> <li>○ <i>Genodermatoses</i></li> <li>○ <i>Thyroid</i></li> <li>○ <i>Renal/neuroendocrine</i></li> <li>○ <i>Pediatric</i></li> </ul> </li> </ul>	Majority (>90%) of cancer genetics consultations occur for one service line	85% one service line with at least 15% occurring for a second service line	75% one service line with at least 20% occurring for a second service line 5% from third service line.	70% one service line with at least 25% occurring for a second service line 5% from third service line	60% one service line with at least 30% occurring for a second service line 10% from third service line.

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<b>Pre-test counseling</b>	<ul style="list-style-type: none"> <li>- 3-4 generation pedigree</li> <li>- Evaluation of the personal and family history to determine what, if any, genetic testing is appropriate</li> <li>- Run risk assessment models as appropriate</li> <li>- Provide all elements for ASCO informed consent<sup>†</sup></li> </ul>	0-1 components of pre-test counseling provided	2 components of pre-test counseling provided and/or components provided episodically	3 components of pre-test counseling provided routinely	All components of pre-test counseling routinely provided	Level 4 plus utilization of computer applications for pedigree drawing and risk calculation.
<b>Post-Test Counseling</b>	<ul style="list-style-type: none"> <li>- Genetic test results disclosure and interpretation in the context of the personal and family history</li> <li>- Cancer risk estimates based on genetic test result or empiric data</li> <li>- Recommendations for cancer screening and prevention</li> <li>- Discuss risk reduction surgeries if appropriate</li> <li>- Educational resources and referrals given as needed</li> <li>- Discuss additional genetic testing options</li> </ul>	0-1 components of post-test counseling provided	2-3 components of post-test counseling provided and/or components provided episodically	4-5 components of post-test counseling provided routinely	All components of pre-test counseling routinely provided with utilization of computer applications for risk calculation when available	Level 4 plus at least one of the following: <ul style="list-style-type: none"> <li>- Patient is referred to long term follow up program</li> <li>- Research options are reviewed</li> <li>- Resources are provided to the patient to assist w/ dissemination of information to family members</li> </ul>
<b>Documentation of the Cancer Genetics Consult in the Patient's Medical Record</b>	<ul style="list-style-type: none"> <li>- Personal History</li> <li>- Family History</li> <li>- Initial Impression</li> <li>- Genetic Testing Recommendations</li> <li>- Test Result</li> <li>- Result Interpretation</li> <li>- Cancer Risk Estimates</li> <li>- Summary Management Recommendations</li> </ul>	Limited to no documentation in the patient's medical record	N/A	Applicable elements documented in the patient's medical record	N/A	Level 3 plus copies distributed to the patient and his/her physicians

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Version 2.0

Approved by the NCCCP Executive Subcommittee in 6/2011

**This Tool has not been validated**

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<b>Financial</b>		No billing occurs for pre- or post-test counseling sessions.	NA	Billing for pre- and post-test counseling session is episodic (ex. Only when MD is present)	NA	Global billing for pre- and post-test counseling session.

† ASCO Informed Consent Elements Described below

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## American Society of Clinical Oncology Policy Statement Update: Genetic Testing for Cancer Susceptibility

Adopted on March 1, 2003, by the American Society of Clinical Oncology

**Table 1. Basic Elements of Informed Consent for Cancer Susceptibility Testing**

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1. Information on the specific test being performed
  2. Implications of a positive and negative result
  3. Possibility that the test will not be informative
  4. Options for risk estimation without genetic testing
  5. Risk of passing a mutation to children
  6. Technical accuracy of the test
  7. Fees involved in testing and counseling
  8. Psychological implications of test results (benefits and risks)
  9. Risks of insurance or employer discrimination
  10. Confidentiality issues
  11. Options and limitations of medical surveillance and strategies for prevention following testing
  12. Importance of sharing genetic test results with at-risk relatives so that they may benefit from this information
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